Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (703) 746-4000

INSTRUCTIONS: This for appropriate. All further con indicated unless corrected by maintenance fee notification	respondence including the selow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	TE FEE and PU ders and notific ) specifying a n	BLICATION FEE (if requation of maintenance fees ew correspondence address	nired). Blocks 1 through 5 s will be mailed to the current ; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.			
DR. MARK FRIEDMAN LTD. C/o Bill Polkinghorn Discovery Dispatch 9003 Florin Way				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
05/12/2005 MBEYEREE, OX	0 <del>0</del> 06297662140 100179	932 \ 🔊	æ. ₹			(Depositor's name)
05/19/1905 RESTENSE 900000929 062140 1001/932			ADEMA			(Signature) (Date)
APPLICATION NO.	FILING DATE FIE		FIRST NAMED II	NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/017,932	12/18/2001	Erez H		nan	74/113	1490
FITLE OF INVENTION: SI	PACE-VARIANT SUBWA	VELENGTH POL	ARIZATION G	RATING AND APPLICAT	IONS THEREOF	
APPLN. TYPE	SMALL ENTITY	SMALL ENTITY ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	07/25/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	J	
ASSAF, FAYEZ G		2872		359-569000		
<ul> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ul>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed fo recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
TECHNION RESEARCH AND DEVELOPHENT GUNDATION LTD. HAIFA, ISRAEL						
· . · · · · · · · · · · · · · · · · · ·		ries (will not be pri	inted on the pate	nt): 🗖 Individual 🛂 C	orporation or other private gr	oup entity Government
la. The following fee(s) are enclosed:  4b. Payment of Fee(s):						
Issue Fee	nall antitu diagonat =itt		A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.			
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to			
Deposit				it Number 06-2140	(enclose an extra c	opy of this form).
	(from status indicated above MALL ENTITY status. See :	•	☐ b. Applicant	is no longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO in NOTE: The Issue Fee and Punterest as shown by the reco	s requested to apply the Issu ablication Fee (if required) wards of the United States Pate	ne Fee and Publicat vill not be accepted ent and Trademark	ion Fee (if any) l from anyone ot Office.	or to re-apply any previous her than the applicant; a reg	y paid issue fee to the application istered attorney or agent; or t	ation identified above. he assignee or other party in
Authorized Signature				Date	5 nry 08	
Typed or printed name MARK FRIEDMAN				Registration	No. <u>33,883</u>	
This collection of information in application. Confidentially ubmitting the completed applies form and/or suggestions	n is required by 37 CFR 1.3 by is governed by 35 U.S.C. plication form to the USPT for reducing this burden, sh	11. The information 122 and 37 CFR 1 0. Time will vary could be sent to the	n is required to on the collect depending upon the Chief Informatics	obtain or retain a benefit by tion is estimated to take 12 the individual case. Any co ion Officer, U.S. Patent and	the public which is to file (an minutes to complete, includin comments on the amount of ti Trademark Office, U.S. Den	d by the USPTO to process, and gathering, preparing, and me you require to complete artment of Commerce P.O.

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.